SHELBY COUNTY BOARD OF COMMISSIONERS

EMERGENCY RESPONSE SUBCOMMITTEE COMMITTEE ON LAW ENFORCEMENT

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SECTION I

SHELBY COUNTY BOARD OF COMMISSIONERS

REPORT OF THE EMERGENCY RESPONSE SUBCOMMITTEE, COMMITTEE ON LAW ENFORCEMENT

Commissioner Steve Mulroy, Subcommittee Chairman

The subcommittee members included Commissioners Steve Mulroy, George Flinn, and James; and Ted Fox, Director of Public Works, Shelby County Government, Dennis Wolf, Fire Chief, City of Germantown and Dr. Joseph Weinberg, Associate Professor, University of Tennessee, Memphis, and also regularly attending was Dr. Joe Holley, Medical Director, Emergency Department, Baptist Hospital, Collierville.

The Emergency Response Subcommittee was formed in December of 2006 in response to well-publicized complaints of undue ambulance response time in the county system.

Several of the well-publicized incidents dealt with a former mayor of Memphis, Wyeth Chandler, whose daughter made the 911 call. A Bartlett ambulance was only five (5) minutes away from the residence; however, the ambulance serving Shelby County was thirteen (13) minutes away. Mr. Chandler had vital signs when the ambulance arrived but he later died at the hospital. Another, highly publicized incident was from the Parisian department store in Collierville placed by the daughter of Mrs. Hollingsworth. Because of an accident on a mayor highway, there was only one available ambulance in the county and it took thirty-one (31) minutes for it to arrive on the scene. Mrs. Hollingsworth had died. Also see Appendix A.

The Subcommittee's initial focus was on improving ambulance response times by increasing the number of ambulances serving the County and the recently renewed contract with the Rural Metro Ambulance Service. However, the Subcommittee recognizes that improving emergency response requires more than simply more ambulances. Instead, it requires a comprehensive approach which improves not only ambulance service but public education, cooperation of area medical providers, and other things. To that end, the Subcommittee sets forth in this report a non-exhaustive list of reform ideas which it believes should be implemented to improve emergency response throughout Shelby County.

The Subcommittee unanimously recommends the following:

1. Increased CPR Training For Citizens.

In most cases the very first person on the scene will be a citizen bystander rather than an emergency services professional. Increasing the number of citizens who can provide basic life support assistance will do much to keep victims alive until professional

help can arrive. Thus, we recommend that these steps be taken to make training in cardiopulmonary resuscitation more widely available.

- (a) Train every county government employee who desires to learn CPR. This training program can be phased in over the course of several years. There is an initial cost in materials of about \$68,000. On a related note, the county is already in the process of purchasing 100 defibrillators for placement in county buildings with associated training in the use of these devices.
- (b) Encourage the Memphis Fire Department to train high school students in Memphis City Schools in CPR. The subcommittee commends Rural Metro for developing and implementing this program of training all Shelby County Schools 9th graders in CPR. A similar program is needed in the Memphis City Schools. The funds needed might be obtained by seeking grant assistance from the Assisi Foundation, the Le Bonheur Foundation, or similar sources. We recommend the County Health Department pursue such funding sources.
- (c) Provide CPR training opportunities for other groups of citizens. The Red Cross, the American Heart Association, and other organizations can provide training to citizens generally; we should do so at an increased rate. Again, grant funds should be used for this purpose, and the County Health Department should pursue such funding. The County Health Department should be asked to report back within 90 days with a strategic plan to promote widespread CPR training for the public.

2. <u>Unified Medical Control and Governance</u>.

In past years emergency services have suffered from a lack of unified coordination, particularly by medical professionals. To remedy this structural problem, the Administration considered new organizational approaches as it negotiated its new ambulance service contract. Some of these ideas evolved from discussions in the Subcommittee, and others were adopted by the Subcommittee once it learned of the Administration's proposed direction.

(a) Hire an EMS Medical Director who works directly for the County. The EMS Medical Director would, among other things, promulgate medical protocols for the delivery of emergency services under the county's contract. The Director must be a licensed allopathic or osteopathic physician in Tennessee and be board certified in either emergency medicine (through the American Board of Emergency Medicine or the American Board of Osteopathic Specialties) or be sub board certified in Pediatric Emergency Medicine (through the American board of Pediatrics). He or she would be hired and fired by the County Mayor after recommendations from the Emergency Medical Response Oversight Committee (EMROC) (see item 2(c) below). To ensure uniformity of review of medical protocols, the County EMS Medical Director would also serve as the state-required EMS Medical Director for the vendor selected by the county

under the new ambulance contract.⁺ If necessary to avoid any legal issues relating to conflict of interest, the EMS Medical Director could serve as a contractor with county government rather than as an employee.

- (b) Pursue local intergovernmental agreements to work under a single EMS Medical Director. Achieving true uniformity throughout Shelby County requires the cooperation of municipalities like Memphis and Bartlett which have emergency services systems independent from those within the county's contract. We recommend that the county seek intergovernmental agreements providing that local government entities within Shelby County be jointly guided by uniform standards set by the EMS Medical Director. Such agreements might be formed with the help of the intergovernmental committee recommended in Section 2(f), below.
- (c) Have a single Quality Review Committee for emergency services which conducts quality review for the entire system. The new county contract currently being negotiated will call for an Emergency Medical Response Oversight Committee (EMROC) which will serve this function. It will be composed of representatives from each of the governmental entities participating in the new ambulance contract (each municipality plus Shelby County itself) plus two physicians (one of whom would be the new EMS Medical Director) appointed by the County Mayor. The subcommittee supports this approach. Area hospitals should allow the EMROC access to individual patient outcome data consistent with HIPAA requirements. The EMROC should evaluate such data, allow a vehicle for citizen feedback on emergency response performance, and issue periodic reports as it deems appropriate on the county's emergency response system.
- (d) Require that the contract vendor promptly provide the County Commission, County Administration, and the EMROC with all annual reports and evaluations by state agencies. This requirement should be included within the county's new contract. In addition, the County should request that state agencies timely provide reports or evaluations directly to the County.
- (e) Hire an EMS Coordinator. A new EMS Coordinator position should be created within the Shelby County Fire Department. The EMS Coordinator would supervise the operation of the contract, enforce penalties for failure to meet contract performance standards, and advise the EMROC. Other functions would include doing computer analyses of "evidence-based practice" regarding emergency and medical service providers in the county. The Coordinator should have significant experience in working in EMS and be at least a paramedic. We recommend that county IT resources be provided the Coordinator as needed to enable such analyses to be performed. Like the

⁺ [Subject to opinion by County Attorney as to the ability of the Medical Director to serve in such a capacity without violating the County Charter. If such an arrangement is deemed to violate the County Charter, and the issue cannot be resolved by making the Medical Director a contractor, the Subcommittee recommends that an appropriate amendment to the County Charter be added to the amendments which the public is expected to consider some time in the next 15 months to address state constitutional concerns regarding the constitutional elected officials.]

EMS Medical Director, the EMS Coordinator would be hired and fired by the County Mayor based on recommendations from the EMROC.

(f) Pursue local intergovernmental agreements to create a "seamless" countywide system. We recommend that the county mayor and the mayors of all local governments with independent emergency response systems form an Intergovernmental Emergency Services And Disaster Response Committee to (1) examine and implement the full scope of Mayor Wharton's plan, and (2) examine other possible ways to integrate efficiency and disaster services toward the goal of creating a seamless system for the citizens of Shelby County.

3. Computer Modeling:

Encourage more use of the "EMSystem," the Web-based computer program which manages resources and assignment of patients to hospitals. This program allows real-time updates on patient demand on different hospitals, allowing for quick informed decisions about how to route patients. We recommend that the EMROC study implementation of this system by area hospitals, dispatchers, and even ambulance crews.

- **4.** <u>Paramedics and EMTs.</u> There is a pronounced shortage of qualified paramedics and EMTs which impairs both recruitment efforts and public safety. Innovative steps should be taken to alleviate this shortage.
- (a) Implement Reserve EMT Program. As a product of the Subcommittee's work, on May 7, 2007, the County Commission approved an EMT Reserve Program. This program would pay for training for volunteers to become certified EMTs in exchange for a commitment of 8 hours a month of free EMT services staffing special events. The cost would not exceed \$50,000. We further recommend that this program be integrated with the Sheriff's similar program.
- **(b) Explore EMT training for high school students**. We recommend that the school systems in Shelby County examine ways to provide EMT training for high school students both to satisfy the EMT recruiting shortage and increase the number of citizens able to render on-the-scene assistance until professionals can arrive.
- (c) Perform a human resources analysis of EMT/paramedic employment positions to look for factors contributing to the EMT labor pool shortage. This HR analysis should be undertaken by the County's Human Resources Department with in the next 10 days.
- (d) Evaluate training capacity. The county should request the Tennessee Department of Health evaluate the need for paramedics and nurses within the various regions in Tennessee and the ability/capacity of our current training programs to meet those needs.
- **5.** <u>Abuse of Emergency Services</u>. Aggravating our existing problems with ambulance response times is the widespread practice by Shelby County residents of using 911

services for non-emergencies. In addition, ambulances are often tied up for significant periods of time while waiting for overcrowded hospital Emergency Departments to take responsibility for patients. Public education and innovations need to be brought to bear on this problem so that scarce ambulance-related resources can be used for true emergencies.

- (a) Train health care providers regarding the proper use of 911. Medical professionals among the Subcommittee members stated that medical providers are surprisingly uninformed in this area.
- (b) Increase public education regarding the availability of non-ambulance health transportation for non-emergency calls.
- (c) Use computer data to scrutinize "high-utilizers" of ambulances for nonemergency calls and actively connect them with alternative transportation. The EMS Coordinator should undertake this effort, with adequate IT support from the County.
- (d) Explore ways to offer paramedic attention to assisted living facilities and other likely "high-utilizers" to provide stopgap care and avoid abuse of emergency services. The EMS Coordinator should undertake this effort as well. The facilities most in need of this service can be identified based on the computer analysis referenced in item 5(c). The EMS Coordinator should pursue funding for the additional on-site after-hours paramedic services at these facilities from the Memphis Housing Authority (for facilities under MHA oversight), TennCare, and the assisted living facilities themselves. The latter entities might be motivated to provide such services once it is shown that they can save insurance money in the long run by avoiding unnecessary emergency service costs.
- (e) Have the County Mayor meet with hospital executives to address the problem of ambulances tied up in hospital Emergency Departments. The Mayor's Medical Working Group is currently engaged in discussions to address this problem. We commend the Mayor for these efforts and wish them success. However, if satisfactory resolution is not made within 120 days of the date of this report, we recommend that the county seek legislative authorization to impose a fee on hospitals for undue delay in taking patients from ambulance crews, in order to recoup the county's costs. To this end, we recommend further that the County Fire Department seek data from Rural Metro regarding how long it takes area hospitals to take responsibility for patients from ambulance crews.
- (f) Implement a priority medical dispatch program with alternate transportation options,

setting shorter or longer response times, or whether we dispatch a paramedic or merely an

EMT, depending on how acute the situation is. The City of Memphis is taking a similar approach with the assistance of Dr. Joseph Holley.

SECTION II

Emergency Response Subcommittee Rural Metro Ambulance Statistics For Years 2004-2006

Appendix A

	Year End 2004	Year End 2005	Year End 2006*
		10,37	10,12
Number of Responses	9,808	6	2
Average response time (minutes)	11	11	12
Median response time (minutes)	9	8	9
Number of Responses between 15-19			
minutes	1,177	1,216	1,362
Number of Responses between 20-24			
minutes	298	276	342
Number of Responses greater than 25			
minutes	212	165	171
Source: Shelby County Fire Department			

^{*}Through December 16, 2006

Response Minutes						
Minutes	2003	2004	2005	2006		
0-4		1456	1452	1405		
5-9		4003	4357	4441		
10-12		1826	2076	2213		
13+		2492	2446	3016		
Total		9777	10331	11075		
1	24	20	20	44		
Longest	31	30	30	41		
Average	9	12	12	12		
l _						

Does not include corpse removal

Source: Shelby County Fire Department

Appendix B

Subcommittee Meeting Schedule and Participants

1. January 17, 2007

- Commissioner Steve Mulroy, Chairman of Subcommittee
- Commissioner Joyce Avery
- Commissioner Henri E. Brooks
- Commissioner Wyatt Bunker
- Commissioner Sidney Chism
- Commissioner George Flinn, Subcommittee Member
- Commissioner Mike Ritz
- Mayor A C Wharton, Jr.
- John Fowlkes, CAO, Shelby County Government
- Brian Kuhn, Attorney, Shelby County Government
- Ted Fox, Director of Public Works, Shelby County Government
- Joseph Weinberg, M.D., Subcommittee Member
- Dennis Wolf, Fire Chief, City of Germantown, Subcommittee Member
- Clarence Cash, Fire Chief, Shelby County Government
- Tre Hargett, Vice President, Rural/Metro Ambulance
- Glenn Miller, Division General Manager, Rural/Metro Ambulance
- Raymond Chiozza, 911 Board
- Jessie Poole, Police Chief, Atoka, Tennessee
- Wink Downen, Shelby County Sheriff, Administrator of Information Technology
- Raymond Shields

2. January 31, 2007

- Commissioner Steve Mulroy, Chairman of Subcommittee
- Commissioner Joyce Avery
- Commissioner Henri E. Brooks
- Commissioner Wyatt Bunker
- Commissioner Mike Carpenter
- Commissioner Sidney Chism
- Commissioner George Flinn, Subcommittee Member
- Commissioner Mike Ritz
- Mayor A C Wharton, Jr.
- John Fowlkes, CAO, Shelby County Government
- Brian Kuhn, Attorney, Shelby County Government
- Joseph Weinberg, M.D., Subcommittee Member
- Clarence Cash, Fire Chief, Shelby County Government
- Dennis Wolf, Fire Chief, City of Germantown, Subcommittee Member
- Raymond Chiozza, 911 Board
- Jessie Poole, Police Chief, Atoka, Tennessee
- Wink Downen, Shelby County Sheriff, Administrator of Information Technology

3. February 26, 2007

- Commissioner Steve Mulroy, Chairman of Subcommittee
- Commissioner Henri E. Brooks
- Commission Mike Carpenter
- Commissioner Sidney Chism
- Commissioner Deidre Malone
- Commissioner Mike Ritz
- John Fowlkes, CAO, Shelby County Government
- Ted Fox, Director Public Works, Shelby County Government
- John Fowlkes, CAO, Shelby County Government
- Brian Kuhn, Attorney, Shelby County Government
- Joseph Weinberg, M.D., Subcommittee Member
- Dennis Wolf, Fire Chief, City of Germantown, Subcommittee Member
- Joe Holley, M.D., State of Tennessee EMS Director, Emergency Services
- Marianne Fournier, Corporate Director, Emergency Services, Methodist Hospital
- William Hiner, Division Chief, Shelby County Fire Department
- Wink Downen, Shelby County Sheriff, Administrator of Information Technology

4. March 21, 2007

- Commissioner Steve Mulroy, Chairman of Subcommittee
- Commissioner Wyatt Bunker
- Commission Mike Carpenter
- Commissioner George Flinn, Subcommittee Member
- Commissioner Mike Ritz
- Ted Fox, Director Public Works, Shelby County Government
- Brian Kuhn, Attorney, Shelby County Government
- Joseph Weinberg, M.D., Subcommittee Member
- Joe Holley, M.D., State of Tennessee EMS Director, Emergency Services
- Wink Downen, Shelby County Sheriff, Administrator of Information Technology

5. April 16, 2007

- Commissioner Steve Mulroy, Chairman of Subcommittee
- Commissioner Henri E. Brooks
- Commissioner Wyatt Bunker
- Commission Mike Carpenter
- Commissioner Mike Ritz
- Joseph Weinberg, M.D., Subcommittee Member
- Dennis Wolf, Fire Chief, City of Germantown, Subcommittee Member
- Clarence Cash, Fire Chief, Shelby County Government
- Lee Hinson, Public Works Supervisor, Shelby County Government

6. May 9, 2007

- Commissioner Steve Mulroy, Chairman of Subcommittee
- Commissioner Wyatt Bunker
- Commission Mike Carpenter
- Commissioner George Flinn, Subcommittee Member
- Commissioner Mike Ritz
- Mayor A C Wharton, Jr.
- Ted Fox, Director Public Works, Shelby County Government
- Joseph Weinberg, M.D., Subcommittee Member
- Dennis Wolf, Fire Chief, City of Germantown, Subcommittee Member
- Clarence Cash, Fire Chief, Shelby County Government
- Joe Holley, M.D., State of Tennessee EMS Director, Emergency Services
- Marianne Fournier, Corporate Director, Emergency Services, Methodist Hospital
- Lee Hinson, Public Works Supervisor, Shelby County Government
- Glen Faught, Southwest Tennessee Community College
- Christy Kinard, County Attorney's Office

Appendix C

Bios of Drs. Weinberg and Holley

Joseph A. Weinberg, M.D. is an Associate Professor in the Division of Critical Care, Department of Pediatrics, University of Tennessee College of Medicine, Memphis. Dr. Weinberg currently represents the Memphis Medical Society on the Shelby County Ambulance Service Contract Quality Review Council. He is on the advisory council for the EMS Division of the Memphis Fire Department. He was Director of Emergency Services at Le Bonheur Children's Medical Center, Memphis, and President of Pediatrics Emergency Specialist, P.C. He has founded, chaired, and been a member of many local and state organizations related to EMS, emergency hospital services and education.

Dr. Joe Holley, Jr. is the Medical Director, Emergency Department, Baptist Hospital, Collierville. He is also the medical director for the municipalities in Shelby County and for the Shelby County fire departments, and several ambulance companies in the area. He is chairman of the MidSouth EMS Council, State of Tennessee EMS medical director. He has many professional accomplishments in emergency services.